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TO: Managers: Owners: Life Support Agencies Medical Directors; Medical Control Authorities

FROM: John F. Hubinger

**Emergency Medical Services Section** 

**SUBJECT:** Information Item; Latex Sensitivity Protocol Recommendations

### **Purpose**

As health care providers you are acutely aware of the fact that many individuals are latex sensitive, and being exposed to these products can result in severe sensitivity reactions. It is also worth noting that the number of individuals sensitive to rubber products has been on the rise. This concern has been brought to the attention of the Emergency Medical Services Coordination Committee (EMSCC) for their recommendations in identifying latex sensitivity. and to develop procedures to minimize exposure to sensitive persons. Their recommendations, outlined in this communication, are intended to facilitate a cooperative initiative between life support agencies and their respective medical control authorities, in developing local protocols to address this issue.

## Background

Latex is a milky sap of the rubber tree having the botanical name Havea Brasiliensis. Most natural rubber is derived from latex, which as we know is contained in many medical and home products.

#### **Definitions**

To following terms should be understood when addressing latex issues.

"Irritant reactions" are not considered allergenic. They are caused by mechanical or thermal injury. Symptoms include redness, cracking, peeling, chapping, fissures, thickened skin which ends at pont of contact.

A "Type I reaction" is an IgE antibody mediated system reaction caused by absorption, inhalation or mucosal contact. Symptoms include redness, swelling, wheezing, asthma, hives, rhinitis, conjunctivitis and anaphylaxis. Onset of symptoms is 5-30 minutes following exposure.

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A "**Type IV reaction**" is a T cell mediated reaction caused by accelerators, antioxidants and disinfectants used in the latex manufacturing process. Symptoms include pruritis, edema, eczema, skin cracking and redness. Onset is often delayed 6 to 48 hours after exposure and usually resolves in 72-96 hours.

"Latex free" describes products in which latex is not able to come into contact with the skin, mucous membrane or blood stream, nor can latex be released into the air.

"Reduced latex environment" is one in which the risk of latex exposure is as low as reasonably possible. This includes routinely eliminating powdered gloves from the patient environment.

## **Latex Sensitivity High Risk Factors**

Individuals at risk for latex allergy generally are those with a history of:

- 1. Identified hypersensitivity reaction to latex products such as sneezing, itching eyes, hives, wheezing or anaphylaxis.
- 2. Eczema from latex gloves.
- 3. Spina bifida or any urogenital abnormality requiring frequent use of latex catheters.
- 4. Multiple surgical procedures in infancy.
- 5. Employment in the manufacture of rubber products.
- 6. Allergies to bananas, chestnuts, kiwi, or avocados.
- 7. Atopic dermatitis.

# **Recommended Policy**

Medical Control Authorities and Life Support Agencies should make a reasonable effort to educate prehospital emergency medical services personnel about the risks, identification, signs and symptoms and treatment of latex sensitivity and allergy. Emergency medical services personnel should also receive training in the selection and use of latex free equipment and procedures to maintain a reduced latex patient environment.

Emergency medical services personnel should make an effort to acknowledge patients who identify themselves as having either a latex allergy, or past reactions to latex products. They should make every effort to maintain a reduced latex environment for identified patients.

## **Latex Sensitivity**

### **Policy**

Reasonable efforts will be made to identify prehospital patients who may be allergic to latex products. Following identification of these patients, efforts will be made to maintain a reduced latex environment.

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### **Procedures**

- 1. Complete the Latex Sensitivity Assessment Form (Attachment 3). The form attached should be used as a template for the type of information which should be collected for patients identified as latex sensitive.
- 2. If the patient is allergic to latex, document same in the run report.
- 3. If the patient admits to other allergies or symptoms which suggest "high risk", notify medical control of the patient(s) status.
- 4. Maintain a reduced latex environment during patient transport.
- 5. Products containing latex that have the potential to come into contact with the patient's skin, or more importantly their mucous membranes, should be avoided. Latex free gloves and medical products should be used. Cover latex containing medical devices with stockingette or Saran Wrap.
- 6. Consult the web site for a list of latex free products (Page 4).
- 7. Remove rubber stoppers from medicine vials prior to drawing medications. **Do not pierce the rubber stopper**.
- 8. Refrain from removing gloves in the presence of the patient.
- 9. If the patient exhibits signs and symptoms of allergic reaction, refer to the appropriate treatment protocol.

# **Latex Sensitivity Education and Training**

Included with this communication are education points (Attachments 1 and 2) which can be patterned for the training of EMS personnel on latex issues. The following outline is to assist you in what the focus of an educational piece should entail.

- I. Background Information
  - A. Composition and identification of latex
  - B. Latex sensitivity and allergic reaction
    - 1. Definition
    - 2. Signs and symptoms
    - 3. High risk populations
  - C. Latex procedures
    - 1. Patient identification
    - 2. Latex sensitivity assessment
    - 3. Precautions
- II. Continuing Education
  - A. Initial training and education
  - B. Refresher

#### **Latex Free Medical Product List**

A list of latex free products can be obtained from the American Latex Allergy Association Inc. (A.L.E.R.T., Inc) at the following web site: [http://www.execpc.com/~alert/hospprod.html]

Note that this list does not represent a verified list of latex free products nor an endorsement of any of the products included in the list. This information is being provided simply for informational purposes only. The responsibility to provide guidance in the purchase of latex free equipment should be available through the vendors which sell those products.

We trust this brief overview on the subject of latex sensitivity will prove informative, as well as educational, in the management of patients who experience latex sensitivity. We encourage all

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life support agencies and their respective medical control authorities to work together in addressing this important health care issue.

Attachment